

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N00000001316

1. Entity Name

CEDAR GROVE DEVELOPMENT AND IMPROVEMENT CORPORAT
ION

FILED
May 12, 2002 8:00 am
Secretary of State

05-12-2002 90638 013 ****61.25

Principal Place of Business

Mailing Address

~~2720 EAST 14TH STREET~~
~~CEDAR GROVE FL 32405~~

~~2720 EAST 14TH STREET~~
~~CEDAR GROVE FL 32405~~

2. Principal Place of Business
1415 Baker Court

3. Mailing Address
1415 Baker Court

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
Panama City Florida

City & State
Panama City, Florida

4. FEI Number 59-3639127

Applied For
Not Applicable

Zip
32401

Country
USA

Zip
32401

Country
USA

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HILL, R. MICHAEL
1415 BAKER COURT
PANAMA CITY FL 32401

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN: 10

TITLE D
NAME PEEL, HILDRIE O ☒ Delete
STREET ADDRESS 1515 SHERMAN AVENUE
CITY-ST-ZIP CEDAR GROVE FL 32405

TITLE President/Director ☒ Change ☐ Addition
NAME R. Michael Hill
STREET ADDRESS 1415 Baker Court
CITY-ST-ZIP Panama City, Florida 32401

TITLE D
NAME PEEL, H. JACOBY ☒ Delete
STREET ADDRESS 1510 SHERMAN AVENUE
CITY-ST-ZIP CEDAR GROVE FL 32405

TITLE Director ☒ Change ☐ Addition
NAME John R. Ferrick
STREET ADDRESS 506 David Avenue
CITY-ST-ZIP Panama City, Florida 32404

TITLE D
NAME WOODS, JAMES A ☒ Delete
STREET ADDRESS 8028 RILEY ROAD
CITY-ST-ZIP PANAMA CITY FL 32409

TITLE Director ☒ Change ☐ Addition
NAME Ruth Fuqua
STREET ADDRESS 10202 Davenport Avenue
CITY-ST-ZIP Panama City, Florida 32405

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/24/02 800-872-4128
Date Daytime Phone #

CR2E037 (9/01)